efile GRAPHIC print - DO NOT PROCESS As Filed Data -

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

DLN: 93493288005120 OMB No. 1545-0047

2019

Open to Public

Form 99	(
% J	

Department of the Treasury

▶ Do not enter social security numbers on this form as it may be made public.

► Go to www.irs.gov/Form990 for instructions and the latest information.

Inspection

		a 2010 e		nning 01-01-2019 , and ending 12-3	1 2010			
			C Name of organization	ming 01-01-2019 , and ending 12-3	1-2019	D Employe	ar identifi	ication number
		pplicable: change	MARCH FOR OUR LIVES ACTION FU	ND				cation number
	me ch					82-4535	615	
□ Ini	tial ret	urn	Doing business as					
		n/terminated				E Telephon	e number	
		return	DO DOV 9030	nail is not delivered to street address) Room/su	iite			
⊔ Ар	piicatio	on pending		ntm. and ZID or ferring mostal and		(202) 6:	18-5012	
			CORAL SPRINGS, FL 33075	ntry, and ZIP or foreign postal code		1		
				1 65	1	G Gross red	ceipts \$ 5,	166,/59
			F Name and address of principal ALEXIS CONFER	al officer:		Is this a group ret	urn for	
			PO BOX 8929			subordinates?		□Yes 🗹 No
			CORAL SPRINGS, FL 33075			Are all subordinational included?	es	☐ Yes ☐No
Ta	x-exer	npt status:	☐ 501(c)(3) ☑ 501(c)(4) ◄	(insert no.) \square 4947(a)(1) or \square 527		If "No," attach a li	ist. (see	instructions)
W	ebsit	e:▶ HTT	PS://MARCHFOROURLIVES.COM/	1	H(c)	Group exemption	number	>
					ļ			
(Forr	n of o	ganization:	Corporation Trust Asso	ociation Other ►	L Year o	of formation: 2018	M State	of legal domicile: DE
		_						
Pa	art I	Sum	*					
			scribe the organization's mission of III, LINE 1.	or most significant activities:				
ڍ	-	JEE TAIKT	III, LINE I.					
<u> </u>	-							
<u> </u>	-							
governance				scontinued its operations or disposed of r				۱ .
	l		-	ng body (Part VI, line 1a)			3	9
Ž.	l		· -	f the governing body (Part VI, line 1b) .			4	9
	5	Total nun	nber of individuals employed in ca	alendar year 2019 (Part V, line 2a)			5	31
Acuviues &	6	Total nun	nber of volunteers (estimate if ne	cessary)			6	2,500
₹	7a	Total unr	elated business revenue from Par	t VIII, column (C), line 12			7a	0
	b	Net unrel	ated business taxable income fro	m Form 990-T, line 39			7b	0
						Prior Year		Current Year
ο.	8	Contribut	ions and grants (Part VIII, line 1h))		17,879,1	.50	5,166,759
₹	9	Program	service revenue (Part VIII, line 2g		0			
Ravenue	l	-	`	, lines 3, 4, and 7d)			0	
α	l		renue (Part VIII, column (A), lines	814,3	348			
	l		, , , , , , , , , , , , , , , , , , , ,	ust equal Part VIII, column (A), line 12)		18,693,4		5,166,759
	_					2,228,8	_	
	l			column (A), lines 1–3)		2,220,0	_	100,428
	l	·	paid to or for members (Part IX, c	* **		207.4	0	
88	l			enefits (Part IX, column (A), lines 5–10)	-	207,4		666,057
Ë	l		nal fundraising fees (Part IX, colu	, ,,			0	(
Expenses	l		raising expenses (Part IX, column (D),					
ш		·	penses (Part IX, column (A), lines			13,875,5	666	3,650,693
	18	Total exp	enses. Add lines 13–17 (must equ	ual Part IX, column (A), line 25)		16,311,9	22	4,417,178
	19	Revenue	less expenses. Subtract line 18 fr	om line 12		2,381,5	576	749,581
S &					Begi	inning of Current Y	ear	End of Year
a Le			. (5 . () . ()			2 201 5	.7.0	2 000 10
Net Assets of Fund Balances	l		ets (Part X, line 16)		<u> </u>	2,381,5	0/0	3,098,187
<u> </u>	l		ilities (Part X, line 26)				0	122,710
			s or fund balances. Subtract line	21 from line 20		2,381,5	76	2,975,477
	rt II		ature Block					
				nined this return, including accompanying e. Declaration of preparer (other than office				
	nowle		· · · · · · · · · · · · · · · · · · ·					
		11				2020 40 42		
		Signatu	ure of officer			2020-10-13 Date		
Sign		, "						
lere	,		CONFER EXECUTIVE DIRECTOR r print name and title					
		17		Dronava's signature	2010		TIM	
			rint/Type preparer's name		Date 2020-10- 1 :	3 Check ☐ if p	TIN 200639053	3
Paid		-	irm's name. • MARCHM LLD			self-employed	1006222	
_	pare	*!	irm's name ► MARCUM LLP			Firm's EIN ► 11-	1900323	
Jse	On	ly 👍	irm's address ▶ 1899 L STREET NW SU	JITE 850		Phone no. (202) 2	227-4000	
			WASHINGTON, DC 20	0036				
1	he TD	ا						es □ No
nay t	ne IK	o aiscuss	uns return with the preparer sho	wn above? (see instructions)			ı ⊻ ı Y	es LINO

Form	990 (2019)					Page 2					
Pa	statement	of Program Service	e Accomplis	hments							
	Check if Sche	dule O contains a respo	onse or note to	any line in this Part III		🗆					
1	Briefly describe the o	rganization's mission:									
				OWER OF YOUNG PEOF	PLE ACROSS THE COUNTRY TO FIG	HT FOR SENSIBLE GUN					
VIOL	ENCE PREVENTION PO	LICIES THAT SAVE LIV	ES.								
2	Did the organization undertake any significant program services during the year which were not listed on										
	the prior Form 990 o	r 990-EZ?				☐ Yes ☑ No					
	If "Yes," describe the	se new services on Sch	nedule O.								
3	Did the organization cease conducting, or make significant changes in how it conducts, any program										
	services?										
	If "Yes," describe these changes on Schedule O.										
4	Section 501(c)(3) and		ons are required	to report the amount	e largest program services, as mean of grants and allocations to others,						
	(Code:) (Expenses \$	1,379,362	including grants of \$	100,428) (Revenue \$)					
	See Additional Data					·					
4b	(Code:) (Expenses \$	1,042,799	including grants of \$) (Revenue \$)					
	See Additional Data					· 					
4c	(Code:) (Expenses \$	751,177	including grants of \$) (Revenue \$)					
	See Additional Data										
4d	Other program service	ces (Describe in Sched	ule O.)								
	(Expenses \$	incl	uding grants of	\$) (Revenue \$)					
4e	Total program serv	/ice expenses ▶	3,173,3	38							
4e	· · · · · · · · · · · · · · · · · · ·				, (1	Form					

18

19

	990 (2019)			Page 3
Par	Checklist of Required Schedules		V	- NI -
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1		No
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 🕏	2	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I "S	3	Yes	
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II</i>	4		
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		No
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If "Yes," complete Schedule D,</i> Part 2	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III </i>	8		No
9	Did the organization report an amount in Part X, line 21 for escrow or custodial account liability; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		No
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi endowments? <i>If "Yes," complete Schedule D, Part V</i>	10		No
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, VIII, IX, or X as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI.	11a	Yes	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII 🕏	11b		No
	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII 2	11c		No
	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX 3	11d		No
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 🕏	11e		No
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	Yes	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a		No
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b	Yes	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		No
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		No
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		No
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes." complete Schedule G. Part I(see instructions)	17		No

column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I(see instructions)

b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?

Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII,

Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"

Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic

government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II

Nο

No

Nο

18

19

20a

20b

21

Yes

Par	Checklist of Required Schedules (continued)			
	eneckingt of Reduited Schedules (continued)			
			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		No
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>	23		No
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
C	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I</i>	25b		No
26	Did the organization report any amount on Part X, line 5 or 22 for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		No
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? <i>If "Yes," complete Schedule L,</i> Part III	27		No
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV	28a		No
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		No
С	A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? If "Yes," complete Schedule L, Part IV	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		No
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33	Yes	
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34		No
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		No
b	If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section $512(b)(13)$? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>	36		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		No
88	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O	38	Yes	
Par				

1a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable .

b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable .

No

Yes

42

0

1c

1a

1b

				Page 5			
	Statements Regarding Other IRS Filings and Tax Compliance (continued)						
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return						
	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b	Yes				
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		No			
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b					
	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)? If "Yes," enter the name of the foreign country:	4a		No			
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).						
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		No			
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		No ———			
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c					
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a	Yes				
	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6 b	Yes				
7	Organizations that may receive deductible contributions under section 170(c).						
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a					
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b					
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c					
d	If "Yes," indicate the number of Forms 8282 filed during the year						
е	e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?						
f	f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?						
_	g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?						
h	h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?						
8	8 Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?						
9	Sponsoring organizations maintaining donor advised funds.						
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a					
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b					
10	Section 501(c)(7) organizations. Enter:						
а	Initiation fees and capital contributions included on Part VIII, line 12 10a						
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b						
11	Section 501(c)(12) organizations. Enter:						
а	Gross income from members or shareholders						
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)						
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a					
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year.						
13	Section 501(c)(29) qualified nonprofit health insurance issuers.						
	Is the organization licensed to issue qualified health plans in more than one state?	13a					
	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans						
	130						
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		No			
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b					
	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year? If "Yes," see instructions and file Form 4720, Schedule N.	15		No			
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O.	16		No			

FOITH	990 (2019)			Page o
Par	Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "Na 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. Check if Schedule O contains a response or note to any line in this Part VI	o" respo	onse to i	lines 🗹
Se	ction A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 9			
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O.			
b	Enter the number of voting members included in line 1a, above, who are independent 1b			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		No
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? .	3		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? .	4	Yes	
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		No
6	Did the organization have members or stockholders?	6	Yes	
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a	Yes	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: $\frac{1}{2}$			
а	The governing body?	8a	Yes	
b	Each committee with authority to act on behalf of the governing body?	8 b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? <i>If "Yes," provide the names and addresses in Schedule O</i>	9		No
Se	ction B. Policies (This Section B requests information about policies not required by the Internal Revenu	e Code	€.)	
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a	Yes	
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b	Yes	
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Yes	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c	Yes	
13	Did the organization have a written whistleblower policy?	13	Yes	
14	Did the organization have a written document retention and destruction policy?	14	Yes	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	Yes	
b	Other officers or key employees of the organization	15b		No
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		No
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	16b		
	ction C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed AL , AR , CA , FL , HI , IL , KS , KY , MD , NH , NM , NY , OR , RI , SC , TN , UT , WV		., MN,	MS,
18	Section 6104 requires an organization to make its Form 1023 (or 1024-A if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.	,		
	☑ Own website ☐ Another's website ☑ Upon request ☐ Other (explain in Schedule O)			
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.			
20	State the name, address, and telephone number of the person who possesses the organization's books and records: ►AMANDA CONLEE PO BOX 8929 CORAL SPRINGS, FL 33075 (202) 618-5012			

Part VII

Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Check if Schedule O contains a response or note to any line in this Part VII .

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax • List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount
- of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See instructions for definition of "key employee." • List the organization's five current highest compensated employees (other than an officer, director, trustee or key employee)
- who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's former officers, key employees, or highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations. • List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the
- organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

organization, more than \$10,000 of reportable co See instructions for the order in which to list the			orgar	nızat	ion	and ar	ıy re	elated organizations	5.	
Check this box if neither the organization no (A) Name and title	r any related o (B) Average			(C)	ated a		(D) Reportable	ctor, or trustee. (E) Reportable	(F) Estimated
	hours per week (list any hours for related	than one box, unless person is both an officer and a director/trustee)						compensation from the organization (W-2/1099-	compensation from related organizations (W-2/1099-	amount of other compensation from the organization and
	organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	MISC)	MISC)	related organizations
(1) AMANDA CONLEE DIR. OF OPERATIONS (AS OF 01/2019)	40.00					х		118,077	0	4,166
(2) MATT DEITSCH DIRECTOR OF STRATEGY	40.00	х						34,334	0	1,979
(3) JACLYN CORIN DIRECTOR OF OUTREACH	40.00	х						19,800	0	0
(4) NINA VINIK CHAIR	20.00	Х		х				0	0	0
(5) MELISSA AUCHARD-SCHOLZ VICE CHAIR	20.00	Х		х				o	0	0
(6) VERNETTA WALKER SECRETARY	20.00	Х		х				О	0	0
(7) JERI RHODES TREASURER	20.00	Х		х				0	0	0
(8) AILEEN ADAMS BOARD MEMBER	5.00	X						0	0	0
(9) ARIEL HOBBS BOARD MEMBER	10.00	х						0	0	0
(10) DAVID HOGG BOARD MEMBER	10.00	х						0	0	0
(11) TYAH-AMOY ROBERTS BOARD MEMBER	10.00	Х						o	0	0
(12) BRIA SMITH BOARD MEMBER	10.00	×						0	0	0
										Form 990 (2019)

Page 8

Section A. Officers, Direct	Jors, Trustees	3, Key	LIIIP	loye	es,	allu	iligi	nest compensat	ed Lilipioyees	COIN	unueu)	
(A) Name and title	(B) Average hours per week (list any hours	than o	one b	ox, u an of	ot che unles	neck mo ess pers er and a tee)	son	(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations	5	(F) Estimated amount of other compensation from the	
	for related organizations below dotted line)	Individu or direct	Instituti	Officer	Key employee	Highest employe	Former	(W-2/1099- MISC)	(W-2/1099- MISC)		organizati relat organiza	ed
		Individual trustee or director	Institutional Truste		ployee	Highest compensated employee						
			4. 4.			at ed						
							\perp					
			_	<u> </u>	-		+	1	+	+		
			+	\vdash		 	+			+		
			<u> </u>	<u> </u>			<u> </u>	<u> </u>	<u> </u>			
			_	<u> </u>	-	_	+	1	+	+		
			+	\vdash		 	+		+	+		
1b Sub-Total						*				+		
d Total (add lines 1b and 1c)						▶		172,211		0		6,145
Total number of individuals (including of reportable compensation from the			e list	ed a	bove	e) who) rec	eived more than \$:	100,000			
3 Did the organization list any former			tee, k	ey e	mpl	oyee,	or hi	ighest compensated	d employee on		Yes	No
line 1a? If "Yes," complete Schedule 3 For any individual listed on line 1a, is	the sum of repo	ortable (m the	3		No
organization and related organization individual	s greater than a	• •	0?11	res.		• mpieu	:e 50	neaule J for Such		4		No
5 Did any person listed on line 1a received services rendered to the organization										5		No
Section B. Independent Contract					<u> </u>		<u> </u>					
Complete this table for your five high from the organization. Report comper	nsation for the c								on's tax year.	npen		
	(A) and business addre	ess							(B) cription of services		(C Comper	nsation
LOEB & LOEB LLP								LEGAL SER	VICES			576,017
10100 SANTA MONICA BLVD STE 2200 LOS ANGELES, CA 90067								COMMUNIC	CATION SERVICES			275 044
PRECISION STRATEGIES LLC 901 NEW YORK AVE NW STE 300								COMMONIC	ATION SERVICES			375,011
WASHINGTON, DC 20001 MARKHAM GROUP LLP							—	PRODUCTION	ON SERVICES			318,283
1000 W 3RD STREET LITTLE ROCK, AR 72201								25CUDITY				
K2 INTELLIGENCE LLC 845 THIRD AVE 5TH FL								SECURITY	SERVICES			248,388
NEW YORK, NY 10022 SOZE PRODUCTIONS INC			—					PRODUCTION	ON SERVICES			130,000
55 WASHINGTON ST STE 300 BROOKLYN, NY 11201												
 Total number of independent contractor 	re (including but	t not lim	aitad /	to th	1000	lictod	aho	va) who received r	agra than \$100 00	nn of		

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of

compensation from the organization ▶ 6

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

		(2019)	of F	Pavar						Page 9
Part	VIII				recna	onse or note to an	/ line in this Part VIII			
		CHECK II SCHEL	-uic	o contains d	, cspc		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
,, ,,	1	a Federated campa	aigns		1a	200		revellue	<u> </u>	J12 - 514
Contributions, Gifts, Grants and Other Similar Amounts		b Membership dues			1 b					
Gra		c Fundraising even	ts .	. [1c					
ifts, ar A		d Related organiza	tions	;	1 d					
7, Gi		e Government grants	(con	tributions)	1e					
ons Sil		 All other contribution and similar amounts 			1f	5,166,559				
buti the		above g Noncash contributio	ns in	L cluded in	11	3,100,339				
n tri		lines 1a - 1f:\$			1 g					
J E		h Total. Add lines	1a-1	f		•	5,166,759			
						Business Code				
	2a									
enue	١.									
Pe X	b	·								
Program Service Revenue	۰	:								
	ا	1								
	e	•								
	f	All other program	serv	ice revenue.						
	g	Total. Add lines 2	2a-2	f	>			_		
	3	Investment income similar amounts) .		luding divide			•			
	l	Income from invest					•			
	5	Royalties					•			
				(i) Rea	ıl	(ii) Personal	_			
	6a	Gross rents	6a							
	b	Less: rental expenses	6b							
	С	Rental income								
	١,	or (loss) I Net rental income	6c	(loss)			_			
		- Net rental meome		(i) Securi		(ii) Other				
	7 a	7a Gross amount from sales of 7a								
		assets other than inventory								
	b	Less: cost or	7b							
		other basis and sales expenses								
	c	Gain or (loss)	7c							
	،	d Net gain or (loss)	•			· · · •				
<u>e</u>	8a	Gross income from fu (not including \$	ındrai	ising events of						
Other Revenue		contributions reported See Part IV, line 18	d on l	line 1c).						
Rev	١,	Less: direct expen			8a 8b					
er	l	Net income or (los				ents 🕨				
	_	Cross in some from	a a no !	ina nativitica						
	Эа	Gross income from See Part IV, line 19	yanı •	• •	9a					
	ŀ	Less: direct expen	ses		9b					
	١ (Net income or (los	s) fr	om gaming	activit	ies 🕨				
	10	aGross sales of inve	entor	ry, less						
		returns and allowa			10a					
		Less: cost of good			10ь					
	Ľ	Net income or (los Miscellaneo			invent	Business Code				
	11	la .								
	1	·								
									1	
	ľ	ن ا								
	,	All other revenue								
		Total. Add lines 1				•				
	12	2 Total revenue. S	ee ir	nstructions .						
							5,166,759	"[0	0 0 000 (3010)

0 11	art IX Statement of Functional Expenses				rage 10
Р	Section 501(c)(3) and 501(c)(4) organizations must co	omplete all columns.	All other organizatio	ns must complete colu	mn (A).
	Check if Schedule O contains a response or note to an				
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	100,428	100,428		
2	Grants and other assistance to domestic individuals. See Part IV, line 22				
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16.				
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	56,113	50,963		5,150
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	542,344	295,177	194,817	52,350
8	Pension plan accruals and contributions (include section 401 (k) and 403(b) employer contributions)				
9	Other employee benefits	11,906	7,912	3,994	
10	Payroll taxes	55,694	32,457	17,736	5,501
11	Fees for services (non-employees):				
	a Management				
ı	b Legal	682,554	335,967	279,394	67,193
•	c Accounting	29,140		29,140	
•	d Lobbying				
•	e Professional fundraising services. See Part IV, line 17				
1	f Investment management fees				
9	g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	197,549	197,549		
12	Advertising and promotion	311,689	299,536	12,153	
13	Office expenses	103,844	35,787	68,057	
14	Information technology	235,765	219,265	16,500	
15	Royalties				
16	Occupancy	72,260	43,356	14,452	14,452
17	Travel	536,380	204,943	331,437	
18	Payments of travel or entertainment expenses for any federal, state, or local public officials .				
19	Conferences, conventions, and meetings	947,881	947,881		
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	1,610	555	1,055	
23	Insurance	313,376	223,241	90,135	
24	Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
	a SECURITY	212,735	174,877	37,858	
	b PAYROLL PROCESSING FEES	5,910	3,444	1,882	584
	c	-,-10	-,	-,2	
	d				
	e All other expenses				
25	Total functional expenses. Add lines 1 through 24e	4,417,178	3,173,338	1,098,610	145,230
	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.	,,,=,,=	-,,,,,,,,		2.1.,230
	Check here ► ☐ if following SOP 98-2 (ASC 958-720).				

Form 990 (2019)

1

2

3

28

31

32

33

ō 29

Assets 30 3,034,299

16,992

30,000

11,896

5,000

3,098,187

122,710

122,710

2.975,477

2,975,477

3,098,187

Form 990 (2019)

(B)

End of year

Beginning of year

13,506

1,610

2,265,018

111,558

0 10c

5,000

0 17

2,381,576

1

2

3

4

5

6 7

8

9

11

12 13

14

15

16

18

19

20

21

22

23

24

25

26

27

28

29

30

31

32

33

0

2,381,576

2,381,576

2,381,576

Page **11**

Check if Schedule O contains a response or note to any line in this Part IX

- (Cash-n	on-in	terest	-b∈

earing . Savings and temporary cash investments .

Pledges and grants receivable, net . . . Accounts receivable, net

Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B). Notes and loans receivable, net . . .

Inventories for sale or use .

10a

Prepaid expenses and deferred charges . basis. Complete Part VI of Schedule D

10b

10a Land, buildings, and equipment: cost or other b Less: accumulated depreciation 11 Investments—publicly traded securities .

Investments—other securities. See Part IV, line 11 .

Assets 12

Investments—program-related. See Part IV, line 11

13 14 Intangible assets .

15 Other assets. See Part IV, line 11 . . . 16 Total assets. Add lines 1 through 15 (must equal line 34) . 17 Accounts payable and accrued expenses . 18 Grants payable .

Deferred revenue . . . Tax-exempt bond liabilities . Escrow or custodial account liability. Complete Part IV of Schedule D

19 20 21 22 Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity

Liabilities 23 Secured mortgages and notes payable to unrelated third parties . . . 24

Unsecured notes and loans payable to unrelated third parties 25 and other liabilities not included on lines 17 - 24).

Other liabilities (including federal income tax, payables to related third parties, Complete Part X of Schedule D Total liabilities. Add lines 17 through 25 . .

26 Fund Balances

Net assets with donor restrictions .

complete lines 29 through 33.

Total net assets or fund balances

Capital stock or trust principal, or current funds .

Total liabilities and net assets/fund balances .

complete lines 27, 28, 32, and 33. 27 Net assets without donor restrictions

Organizations that follow FASB ASC 958, check here <a> \square and

Organizations that do not follow FASB ASC 958, check here > \(\begin{align*} \text{and} \end{and} \)

Paid-in or capital surplus, or land, building or equipment fund . . .

Retained earnings, endowment, accumulated income, or other funds

Form	990 (2019)				Page 12
Pa	Reconcilliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				
	T. I. () () () () () () () () () (_	466 750
1	Total revenue (must equal Part VIII, column (A), line 12)	1			,166,759
2	Total expenses (must equal Part IX, column (A), line 25)	2			,417,178
3	Revenue less expenses. Subtract line 2 from line 1	3			749,581
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		2,	,381,576
5	Net unrealized gains (losses) on investments	5			
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			155,680
9	Other changes in net assets or fund balances (explain in Schedule O)	9			0
	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10		2,	,975,477
Pa	tXII Financial Statements and Reporting				_
	Check if Schedule O contains a response or note to any line in this Part XII				
			$\overline{}$	Yes	No
1	Accounting method used to prepare the Form 990:				
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		No
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed separate basis, consolidated basis, or both:	on a			
	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	Yes	
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate consolidated basis, or both:	basis,			
	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis				
С	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?		2c	Yes	1
	If the organization changed either its oversight process or selection process during the tax year, explain in Sche	dule O.			
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sii Audit Act and OMB Circular A-133?	ngle	3a		No

3b

Form **990** (2019)

b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.

Additional Data

Software ID:

Software Version:

EIN: 82-4535615

Name: MARCH FOR OUR LIVES ACTION FUND

Form 990 (2019)

YOUTH VOTER TURNOUT IN 2020 AND BEYOND.

Form 990, Part III, Line 4a:

CHAPTERS AND MOVEMENT BUILDING: OUR GRASSROOTS NETWORK ALLOWS MORE YOUTH TO TAKE ON A BIGGER ROLE IN OUR MOVEMENT AND IN THE POLITICAL PROCESS, AND IT PROVIDES OPPORTUNITIES FOR YOUNG TO CREATE CHANGE AT ALL LEVELS. MFOL'S 250+ CHAPTERS ARE WORKING TO CREATE CHANGE IN THEIR

COMMUNITIES, CHAPTERS REGISTER VOTERS, LOBBY STATE LEGISLATURES, ORGANIZE TOWN HALLS AND RALLIES, AND MORE, WE ARE INVESTING IN OUR CHAPTERS WITH DEDICATED STAFF AND TRAINING THROUGHOUT THE YEAR AND AT OUR ANNUAL SUMMIT. THEY WILL BE OUR ENGINE TO REGISTER YOUNG VOTERS AND MOBILIZE

ADVOCACY AND LEGISLATIVE EFFORTS: WE WORK WITH MEMBERS OF CONGRESS AND STATE LEGISLATURES TO PUSH FOR LIFE-SAVING LAWS. WE TESTIFY BEFORE CONGRESS. WE PACK HEARING ROOMS FOR BILL MARKUPS. WE DIRECT THOUSANDS OF CALLS AND EMAILS TO ELECTED OFFICIALS. AND OUR STUDENT POLICY TEAM IN D.C. HAS FORMED CLOSED RELATIONSHIPS WITH CONGRESSIONAL LEADERSHIP, BY LAUNCHING THE PEACE PLAN. OUR GROUNDBREAKING POLICY PLATFORM. WE'RE

Form 990, Part III, Line 4b:

NOT JUST ANOTHER VOICE IN THE LEGISLATIVE CONVERSATION - WE'RE DRIVING IT FORWARD.

ARTISTIC ACTIVISM "ARTIVISM": WE BELIEVE THAT WE NEED TO FUNDAMENTALLY SHIFT AMERICA'S RELATIONSHIP WITH GUNS, AND ART IS ONE OF OUR MOST POWERFUL WAYS TO BREAK THROUGH. OUR ARTISTIC PROJECTS BRING YOUNG PEOPLE INTO OUR MOVEMENT WHO MIGHT NOT SEE THEMSELVES AS TRADITIONAL ACTIVISTS, BUT WHO HAVE AN ESSENTIAL ROLE TO PLAY IN OUR FIGHT TO SAVE LIVES. MARCH FOR OUR LIVES NOT ONLY CREATES OUR OWN ART INSTALLATIONS, BUT WE ALSO PARTNER WITH IMPORTANT ORGANIZATIONS LIKE CHANGE THE REF. AN ORGANIZATION STARTED BY MANUEL AND PATRICIA OLIVER WHO LOST THEIR SON

JOAOUIN IN THE PARKLAND SCHOOL SHOOTING, TO CREATE ART ON LOSS AND GUN VIOLENCE THROUGHOUT THE COUNTRY.

Form 990, Part III, Line 4c:

efile GRAPHIC print - DO NOT PROCESS As Filed Data -

• Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C.

For Paperwork Reduction Act Notice, see the instructions for Form 990 or 990-EZ.

Political Campaign and Lobbying Activities

▶Go to www.irs.gov/Form990 for instructions and the latest information.

If the organization answered "Yes" on Form 990, Part IV, Line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

• Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and C below. Do not complete Part I-B.

For Organizations Exempt From Income Tax Under section 501(c) and section 527

2019

DLN: 93493288005120

Open to Public

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

EZ)

SCHEDULE C (Form 990 or 990-

► Complete if the organization is described below. ► Attach to Form 990 or Form 990-EZ.

Open to Publ Inspection

f the	Section 501(c)(3) organizations that Section 501(c)(3) organizations that	n Form 990, Part IV, Line 4, or Form 9 t have filed Form 5768 (election under 9 t have NOT filed Form 5768 (election u n Form 990, Part IV, Line 5 (Proxy Ta s), then	section 501(h)): Co nder section 501(h	omplete Part II-A. Do not co i)): Complete Part II-B. Do	omplete Part II-B. not complete Part II-A.
	me of the organization RCH FOR OUR LIVES ACTION FUND			Employer ider	ntification number
MAF	RCH FOR OOK LIVES ACTION FUND			82-4535615	
Par	t I-A Complete if the orga	nization is exempt under section	on 501(c) or is	a section 527 organi	zation.
1	Provide a description of the organ "political campaign activities")	nization's direct and indirect political car	mpaign activities ir	n Part IV (see instructions i	for definition of
2	Political campaign activity expend	litures (see instructions)		>	\$
3		paign activities (see instructions)			
Par	t I-B Complete if the orga	nization is exempt under section	on 501(c)(3).		
1		ax incurred by the organization under s		>	\$
2		ax incurred by organization managers u			\$
3	If the organization incurred a sec	tion 4955 tax, did it file Form 4720 for	this year?		🗌 Yes 🔲 No
4a	Was a correction made?				☐ Yes ☐ No
b	If "Yes," describe in Part IV.				
Par	t I-C Complete if the orga	nization is exempt under section	on 501(c), exce	ept section 501(c)(3)	<u>). </u>
1	· ·	ed by the filing organization for section	·		\$
2		anization's funds contributed to other o			\$
3	Total exempt function expenditur	es. Add lines 1 and 2. Enter here and o	n Form 1120-POL,	line 17b ▶	\$
4	Did the filing organization file For	m 1120-POL for this year?			☐ Yes ☐ No
5	organization made payments. For of political contributions received	employer identification number (EIN) or each organization listed, enter the am that were promptly and directly deliver ee (PAC). If additional space is needed,	ount paid from the ed to a separate p	e filing organization's funds solitical organization, such a	. Also enter the amount
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0
1					
2					
3					
1					
					
 5					

Cat. No. 50084S

Schedule C (Form 990 or 990-EZ) 2019

PART I-A, LINE 1:

SAFETY FORUM."

Sche	edule C (Form 990 or 990-EZ) 2019			F	Page 3
Pa	rt II-B Complete if the organization is exempt under section 501(c)(3) and has NOT fill Form 5768 (election under section 501(h)).	ed			
For e	each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying	(a)	(b)	
activ		Yes	No	Amou	nt
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:				
а	Volunteers?				
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?				
C	Media advertisements?				
d	Mailings to members, legislators, or the public?				
е	Publications, or published or broadcast statements?				
f	Grants to other organizations for lobbying purposes?				
g	Direct contact with legislators, their staffs, government officials, or a legislative body?				
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?				
i	Other activities?				
j	Total. Add lines 1c through 1i				
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?				
b	If "Yes," enter the amount of any tax incurred under section 4912				
С	If "Yes," enter the amount of any tax incurred by organization managers under section 4912		-		
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?		-		
Pa	rt III-A Complete if the organization is exempt under section 501(c)(4), section 501(c) 501(c)(6).	(5), o	r sectio	n Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?			1	+
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?			2	
3	Did the organization agree to carry over lobbying and political expenditures from the prior year?			3	1
	complete if the organization is exempt under section 501(c)(4), section 501(c) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part answered "Yes."	(5), o III-A	r sectio	n 501(d	c)(6)
1	Dues, assessments and similar amounts from members	1			
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).				
а	Current year	2a			
b	Carryover from last year	2b			
С	Total	2c			
3	Aggregate amount reported in section $6033(e)(1)(A)$ notices of nondeductible section $162(e)$ dues .	3			
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	4			
5	Taxable amount of lobbying and political expenditures (see instructions)	5			
	art IV Supplemental Information				
	,,	D :	a 1: :	12.	
	ovide the descriptions required for Part l-A, line 1; Part l-B, line 4; Part l-C, line 5; Part II-A (affiliated group list); tructions), and Part II-B, line 1. Also, complete this part for any additional information.	Part II-	·A, lines 1	. and 2 (s	ee
	Return Reference Explanation				

MFOL CONDUCTED A PRESIDENTIAL FORUM ON GUN VIOLENCE PREVENTION CALLED THE "2020 GUN

efile GRAPHIC print - DO NOT PROCESS **SCHEDULE D**

As Filed Data -

DLN: 93493288005120

OMB No. 1545-0047

Supplemental Financial Statements

▶ Complete if the organization answered "Yes," on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. ► Attach to Form 990.

Open to Public Inspection

2019

Department of the Treasury Internal Revenue Service

(Form 990)

▶ Go to www.irs.gov/Form990 for instructions and the latest information.

	me of the organization	Employer identification number
MAF	RCH FOR OUR LIVES ACTION FUND	82-4535615
Pa	Organizations Maintaining Donor Advised Funds or Other Similar Funds o	r Accounts.
	Complete if the organization answered "Yes" on Form 990, Part IV, line 6. (a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year	(b) Funds and other accounts
2	Aggregate value of contributions to (during year)	
3	Aggregate value of grants from (during year)	
4	Aggregate value at end of year	
5	Did the organization inform all donors and donor advisors in writing that the assets held in donor adv	vised funds are the
•	organization's property, subject to the organization's exclusive legal control?	
6	Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose c private benefit?	
Pa	rt II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7.	
1	Purpose(s) of conservation easements held by the organization (check all that apply).	
	Preservation of land for public use (e.g., recreation or education)	historically important land area
	☐ Protection of natural habitat ☐ Preservation of a c	ertified historic structure
	Preservation of open space	
2	Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form easement on the last day of the tax year.	
а	Total number of conservation easements	Held at the End of the Year 2a
b	Total acreage restricted by conservation easements	2b
C	Number of conservation easements on a certified historic structure included in (a)	2c
d	Number of conservation easements on a certified installed after 7/25/06, and not on a historic	2d
u	structure listed in the National Register	20
3	Number of conservation easements modified, transferred, released, extinguished, or terminated by t tax year ▶	he organization during the:
4	Number of states where property subject to conservation easement is located ▶	
5	Does the organization have a written policy regarding the periodic monitoring, inspection, handling of	of violations,
	and enforcement of the conservation easements it holds?	☐ Yes ☐ No
6	Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing co	nservation easements during the year
7	Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conserved \$\infty\$	ation easements during the year
8	Does each conservation easement reported on line 2(d) above satisfy the requirements of section 17	70(h)(4)(B)(i)
	and section 170(h)(4)(B)(ii)?	☐ Yes ☐ No
9	In Part XIII, describe how the organization reports conservation easements in its revenue and exper balance sheet, and include, if applicable, the text of the footnote to the organization's financial state the organization's accounting for conservation easements.	
Par	Organizations Maintaining Collections of Art, Historical Treasures, or Othe Complete if the organization answered "Yes" on Form 990, Part IV, line 8.	er Similar Assets.
1a	If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue sta art, historical treasures, or other similar assets held for public exhibition, education, or research in fu provide, in Part XIII, the text of the footnote to its financial statements that describes these items.	
b	If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statem historical treasures, or other similar assets held for public exhibition, education, or research in further	
	following amounts relating to these items:	
	i) Revenue included on Form 990, Part VIII, line 1	
(i	ii)Assets included in Form 990, Part X	-
2	If the organization received or held works of art, historical treasures, or other similar assets for finar following amounts required to be reported under SFAS 116 (ASC 958) relating to these items:	
а	Revenue included on Form 990, Part VIII, line 1	▶\$
b	Assets included in Form 990, Part X	▶\$

Cat. No. 52283D

Schedule D (Form 990) 2019

For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Par	3 11 11	Organizations Maintaining Co	llections of Art, H	listori	cal Tı	reası	ires, or	r Other	Similar A	ssets (con	tinued)
3		g the organization's acquisition, accessio s (check all that apply):	n, and other records,	check	any of	the fo	llowing t	hat are a	significant (use of its co	llection
а		Public exhibition		d		Loan	or excha	ange prog	ırams		
b		Scholarly research		е		Othe	r				
С		Preservation for future generations									
4	Provi Part :	de a description of the organization's co XIII.	llections and explain h	how the	ey furth	ner the	e organiz	zation's ex	kempt purpo	ose in	
5		ng the year, did the organization solicit ones to be sold to raise funds rather than to								☐ Yes	□ No
Pai	rt IV	Escrow and Custodial Arrange Complete if the organization answ X, line 21.		m 990	, Part	IV, li	ne 9, oi	r reporte	ed an amou	unt on For	n 990, Part
1a	Is the	e organization an agent, trustee, custodi ded on Form 990, Part X?	ian or other intermedi 	iary for 	contril · ·	bution 	s or othe	er assets 	not	☐ Yes	□ No
b	If "Ye	es," explain the arrangement in Part XII:	I and complete the fo	llowina	table:				Α	mount	
c		nning balance	·	_			ŀ	1c			
d	_	ions during the year					ŀ	1d			
е		ibutions during the year					1	1e			
f		ng balance					1	1f			
_									1.111. 2	п.,	
2a		he organization include an amount on Fo							-		∐ No
b		es," explain the arrangement in Part XIII	. Check here if the ex	kplanati	on has	been	provided	d in Part)	XIII	Ш	
Pa	rt V	Endowment Funds. Complete if the organization answ	wered "Ves" on For	m 990	Dart	TV/ li	ne 10				
		complete if the organization anst	(a) Current year		rior yea			ears back	(d) Three ye	ars back (e)	Four years back
1 a	Beginr	ning of year balance									
b	Contril	butions									
С	Net in	vestment earnings, gains, and losses									
d	Grants	s or scholarships									
		expenditures for facilities ograms									
f	Admin	istrative expenses									
g	End of	year balance									
2		de the estimated percentage of the curr	ent year end balance	(line 1	g, colu	mn (a)) held a	s:			
a		anent endowment ►									
b											
С		porarily restricted endowment									
3a	Are t	percentages on lines 2a, 2b, and 2c shou here endowment funds not in the posses nization by:		ion that	t are h	eld an	d admini	istered fo	r the		Yes No
	(i) u	nrelated organizations								3a(i)	
b		related organizations								3a(ii)	
4	Desc	ribe in Part XIII the intended uses of the	e organization's endov	vment f	unds.						
Pai	rt VI	Land, Buildings, and Equipme	nt.								
		Complete if the organization answ									
	Descr	iption of property (a) Cost or ot (investme		or other	basis (d	other)	(c) Acc	umulated o	lepreciation	(d) I	Book value
1 a	Land										
b	Buildir	ngs									
С	Leasel	nold improvements									
d	Equipr	ment				4,345			391		3,954
						9,161			1,219		7,942
		lines 1a through 1e. (Column (d) must	equal Form 990, Part	X, colu	mn (B)), line	10(c).)		>		11,896

Part VII Investments—Other Securities.) + T) / :	11h C F 000	Doub V. Bing 4.2
Complete if the organization answered "Yes" on Form 990, P (a) Description of security or category (including name of security)	(b) Book value	(c) Metho	d of valuation: -year market value
(1) Financial derivatives			
(A)			
(B)			
(C)			
(D)			
(E)			
(F)			
(G)			
(H)			
Total. (Column (b) must equal Form 990, Part X, col. (B) line 12.)			
Part VIII Investments—Program Related. Complete if the organization answered 'Yes' on Form 990, P (a) Description of investment	art IV, li	ne 11c. See Form 990, (b) Book value	Part X, line 13. (c) Method of valuation: Cost or end-of-year market value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, col.(B) line 13.)		•	
Part IX Other Assets. Complete if the organization answered 'Yes' on Form 990, Pa	art IV, lin	ne 11d. See Form 990, Pai	
(a) Description			(b) Book value
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, col.(B) line 15.)			•
Part X Other Liabilities. Complete if the organization answered 'Yes' on Form 990, Pa	art IV, lin	ne 11e or 11f.See Form	990, Part X, line 25.
 (a) Description of liability (1) Federal income taxes 			(b) Book value
(2)			
(3)			
(4) (5)			
(5)			
(6)			
(7)			
(8)			
(9) Total (Column (h) must equal Form 990, Part Y, col (R) line 25.)			
Total. (Column (b) must equal Form 990, Part X, col.(B) line 25.) 2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote	e to the or	ganization's financial state	
organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check h	ere if the		een provided in Part XIII Schedule D (Form 990) 2019

Schedule D (Form 990) 2019

	Complete if the organize	zation answered 'Yes' on Form 990, Part	t IV, li	ne 12a.		
1	Total revenue, gains, and other su	upport per audited financial statements			1	
2	Amounts included on line 1 but no	ot on Form 990, Part VIII, line 12:				
а	Net unrealized gains (losses) on in	nvestments	2a			
b	Donated services and use of facilit	ties	2b			
c	Recoveries of prior year grants .		2c			
d	Other (Describe in Part XIII.) .		2d			
e	Add lines 2a through 2d		٠		2e	
3	Subtract line 2e from line 1				3	
4	Amounts included on Form 990, P	art VIII, line 12, but not on line 1:				
а	Investment expenses not included	on Form 990, Part VIII, line 7b .	4a			
b	Other (Describe in Part XIII.) .		4b			
c	Add lines 4a and 4b		٠		4c	
5	Total revenue. Add lines 3 and 4c	. (This must equal Form 990, Part I, line 12.)			5	
Par		penses per Audited Financial Statem		•	Retur	n.
	•	zation answered 'Yes' on Form 990, Part			1 .	
1	•	lited financial statements			1	
2	Amounts included on line 1 but no	, ,		1		
а		cies	2a			
b	Prior year adjustments		2b		_	
С	Other losses		2c			
d	Other (Describe in Part XIII.) .		2d]	
е	Add lines 2a through 2d				2e	
3	Subtract line 2e from line 1				3	
4	Amounts included on Form 990, P	art IX, line 25, but not on line 1:				
а	Investment expenses not included	l on Form 990, Part VIII, line 7b 🔒 🔒	4a			
b	Other (Describe in Part XIII.) .		4b			
C	Add lines 4a and 4b				4c	
5	Total expenses. Add lines 3 and 4	c. (This must equal Form 990, Part I, line 18.	.) .		5	
Pai	t XIII Supplemental Info	rmation				
		art II, lines 3, 5, and 9; Part III, lines 1a and a 2d and 4b. Also complete this part to provide			t V, line	4; Part X, line 2; Part
	Return Reference		Ex	olanation		
See A	Additional Data Table					

Page 4

chedule D (Form 990) 2019	Page 5
Part XIII Supplemental Info	ormation (continued)
Return Reference	Explanation

Schedule D (Form 990) 2019

Additional Data

Software ID: Software Version:

EIN: 82-4535615

Name: MARCH FOR OUR LIVES ACTION FUND

Supplemental Information Return Reference

TUS.

Explanation PART X, LINE 2: THE ACTION FUND PERFORMED AN EVALUATION OF UNCERTAINTY IN INCOME TAXES FOR THE PERIOD THE YEAR ENDED DECEMBER 31, 2019, AND DETERMINED THAT THERE WERE NO MATTERS THAT WOULD REQUIRE RECOGNITION IN THE FINANCIAL STATEMENTS OR THAT MAY HAVE ANY EFFECT ON ITS TAX-EXEMPT STA

efile GRAPHIC print - DC	NOT PROCESS	As Filed Data -				I	DLN: 93493288005120
Note: To capture the full		ocument, please se	lect landscape mode	e (11" x 8.5") whe	en printing.		
Schedule I (Form 990)		Governments a	other Assistand and Individuals tion answered "Yes," o	s in the Unite	d States		OMB No. 1545-0047 2019 Open to Public
Department of the Treasury Internal Revenue Service		► Go to <u>www</u>	v.irs.gov/Form990 for		on.		Inspection
Name of the organization						Employer ident	ification number
MARCH FOR OUR LIVES ACTION	N FUND					82-4535615	
Part I General Inform	nation on Grants	and Assistance					
Does the organization ma the selection criteria used					for the grants or assistance	e, and	☑ Yes ☐ No
2 Describe in Part IV the or	ganization's procedur	es for monitoring the use	e of grant funds in the Un	ited States.			
		estic Organizations ar can be duplicated if add		nts. Complete if the o	rganization answered "Yes"	on Form 990, Part IV,	ine 21, for any recipient
(a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1) SOCIAL GOOD FUND INC 6641 AQUA VISTA COURT RICHMOND, CA 94805	46-1323531	501(C)(3)	10,000				MFOL CA CHAPTER GRANTS
(2) MARCH FOR OUR LIVES NORTH CAROLINA 601 N MENDENHALL STREET GREENSBORO, NC 27401	83-1935250	501(C)(4)	9,713				MFOL NC CHAPTER GRANTS
2 Enter total number of sec	tion 501(c)(3) and go	vernment organizations	listed in the line 1 table .			▶ _	1
3 Enter total number of oth	er organizations listed	${\sf d}$ in the line 1 table . ${\sf \ .}$	<u> </u>	<u></u>		▶ <u>_</u>	1
For Paperwork Reduction Act Not	tice, see the Instruction	ns for Form 990.		Cat. No. 50055			Schedule I (Form 990) 2019

Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22.

AND CONDUCTED DUE DILIGENCE BEFORE ISSUING GRANTS.

Schedule I (Form 990) 2019

Part III

(2)			
(3)			

(4)

(5)(6) (7)

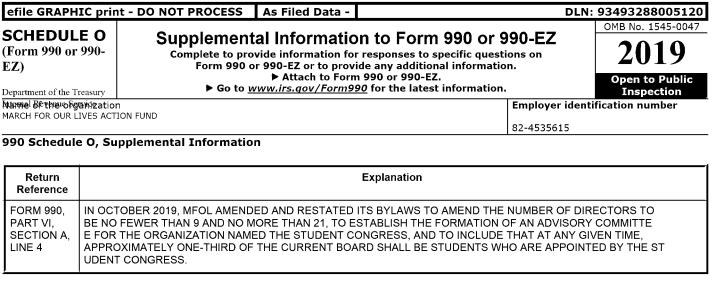
Part IV Supplemental Information. Provide the information required in Part I, line 2; Part III, column (b); and any other additional information.

Explanation Return Reference

PART I, LINE 2: THE GRANTS REPORTED HERE WERE MADE TO COMMUNITY-BASED AND YOUTH-FOCUSED 501(C)(3) CHARITIES TO SUPPORT THE WORK OF MARCH FOR OUR LIVES AFFILIATED CHAPTERS FOCUSED ON ENDING GUN VIOLENCE IN THEIR COMMUNITIES. THE PURPOSE OF THE CHAPTER GRANTS WAS TO HELP COVER THE DIRECT COSTS FOR EXPENSES RELATED TO EACH GROUP'S ACTIVITIES AND EFFORTS INTENDED TO FOSTER YOUTH LEADERSHIP, INCREASE CIVIC ENGAGEMENT IN LOCAL YOUTH, AND FIGHT FOR GUN LEGISLATION LOCALLY. FOR GRANTS TO OUTSIDE PARTNER ORGANIZATIONS, MFOL LEADERSHIP STAFF CONFIRMED 501(C)(3) STATUS

Schedule I (Form 990) 2019

Page 2



Return Explanation
Reference

LINE 6

FORM 990, MFOL WAS FORMED WITH A PARALLEL STUDENT GOVERNING BODY.
PART VI,
SECTION A.

Return Explanation
Reference

FORM 990, THE STUDENT GOVERNING BODY HAS THE RIGHT TO ELECT STUDENT MEMBERS TO THE BOARD. STUDENT ME MBERS HAVE VOTING RIGHTS ON ALL BOARD VOTES, EXCEPT ON MATTERS OF COMPENSATION OF OTHER ST SECTION A, UDENT BOARD MEMBERS.

Return Explanation

FORM 990, THE FEDERAL FORM 990 IS PREPARED BY MARCUM LLP, AN OUTSIDE ACCOUNTING FIRM, AND REVIEWED B PART VI, Y SENIOR MANAGEMENT. THE FINAL DRAFT FEDERAL FORM 990 IS DISTRIBUTED TO THE ENTIRE BOARD O SECTION B, F DIRECTORS PRIOR TO FILING WITH THE INTERNAL REVENUE SERVICE.

Return Reference	Explanation
Reference	
FORM 990,	MFOL'S CONFLICT OF INTEREST POLICY IS FURNISHED ANNUALLY TO ALL INCUMBENT AND INCOMING DIR
PART VI,	ECTORS AND OFFICERS OF THE CORPORATION. EACH DIRECTOR AND OFFICER ANNUALLY SIGNS A STATEME
SECTION B,	NT THAT AFFIRMS THAT HE OR SHE HAS RECEIVED A COPY OF THE POLICY; HAS READ AND UNDERSTANDS
LINE 12C	THE POLICY; AND HAS AGREED TO COMPLY WITH THE POLICY. EACH DIRECTOR AND OFFICER ANNUALLY
	FILES A STATEMENT WITH THE BOARD FOR DIRECTORS THAT LISTS: (1) ANY OUTSIDE EMPLOYMENT OR C
	ONSULTING WORK THAT COULD CONSTITUTE A CONFLICT; AND (2) ANY BOARD MEMBERSHIP OR AFFILIATI
	ON WITH OTHER ORGANIZATIONS THAT COULD CONSTITUTE A CONFLICT. EACH DIRECTOR AND OFFICER AL
	SO LISTS HIS OR HER INVESTMENTS IN ANY CORPORATION, PARTNERSHIP, TRUST, OR FUND IN WHICH H
	E OR SHE, TOGETHER WITH MEMBERS OF HIS OR HER FAMILY, HAS DIRECTLY OR INDIRECTLY A GREATER
	THAN 35% OWNERSHIP INTEREST, REGARDLESS OF WHETHER SUCH INVESTMENTS COULD CONSTITUTE A CO
	NFLICT. 1. ALL MATERIAL FACTS CONCERNING ANY SITUATION THAT MIGHT BE VIEWED AS A CONFLICT
	ARE DISCLOSED TO THE BOARD OF DIRECTORS BY THE DIRECTOR OR OFFICER CONCERNED. WHERE DOUBT
	EXISTS REGARDING WHETHER A CONFLICT EXISTS OR APPEARS TO EXIST, THE MATTER IS RESOLVED BY
	THE BOARD OF DIRECTORS. 2. IN ORDER TO ASSURE THAT PERSONS WHO HAVE A CONFLICT OF INTEREST
	DO NOT HAVE INFLUENCE OVER THE CORPORATION REGARDING BUSINESS TRANSACTIONS INVOLVING THEM
	SELVES, NO DIRECTOR OR OFFICER MAY BE PRESENT FOR A VOTE BY THE BOARD OF DIRECTORS ON ANY
	DECISION OR ACTION BY THE CORPORATION WHICH WOULD DIRECTLY OR INDIRECTLY BENEFITS SUCH DIR
	ECTOR OR OFFICER. THE DIRECTOR OR OFFICER MAY, HOWEVER, ANSWER QUESTIONS OR RESPOND TO REQUESTIONS OR RESPOND TO REQUESTS, AT A MEETING OR OTHERWISE, FOR FACTUAL INFORMATION NEEDED FOR THE BOARD OF DIRECTOR
	IS TO MAKE AN INFORMED DECISION. 3. THE BOARD OF DIRECTORS WILL NOT APPROVE ANY TRANSACTION
	TO WHICH THE CORPORATION WOULD BE A PARTY AND IN WHICH A DIRECTOR OR OFFICER OF THE CORPO
	RATION HAS A MATERIAL FINANCIAL INTEREST UNLESS AND UNTIL THE BOARD OF DIRECTORS HAS SPECI
	FICALLY AND IN GOOD FAITH DETERMINED AFTER REASONABLE INVESTIGATION (INCLUDING A REVIEW OF
	THE TERMS UPON WHICH OTHER COMPARABLE ORGANIZATIONS ENTER TRANSACTIONS OR ARRANGEMENTS SI
	MILAR TO THE ONE UNDER CONSIDERATION) THAT: A. THE BOARD IS AWARE OF ALL MATERIAL FACTS CO
	NCERNING THE TRANSACTION AND THE DIRECTOR OR OFFICER'S INTEREST IN THE TRANSACTION; B. THE
	CORPORATION IS ENTERING INTO THE TRANSACTION FOR ITS OWN BENEFIT; C. THE TRANSACTION IS F
	AIR AND REASONABLE AS TO THE CORPORATION; AND D. THE CORPORATION COULD NOT HAVE OBTAINED A
	MORE ADVANTAGEOUS ARRANGEMENT WITH REASONABLE EFFORT UNDER THE CIRCUMSTANCES.
<u></u>	

990 Schedule O, Supplemental Information

Return Explanation

Reference

11010101100	
FORM 990,	MFOL DID NOT HAVE ANYONE SERVE AS CEO OR EXECUTIVE DIRECTOR DURING 2019. COMPENSATION PAID
PART VI,	TO THE MOST SENIOR EMPLOYEE, DIRECTOR OF OPERATIONS, WAS DETERMINED AND APPROVED BY THE B
SECTION B,	OARD IN ACCORDANCE WITH THE "REBUTTABLE PRESUMPTION OF REASONABLENESS PROCEDURES PRESCRIBE
LINE 15A	D IN THE REGULATIONS UNDER IRC SECTION 4958

Explanation Return Reference

FORM 990. MFOL MAKES ITS GOVERNING DOCUMENTS. CONFLICT OF INTEREST POLICY. AND FINANCIAL STATEMENT AVAILABLE TO THE PUBLIC UPON REQUEST.

PART VI. SECTION C. LINE 19

990 Schedule O, Supplemental Information

SCHEDULE R
(Form 990)

Related

Department of the Treasury

MARCH FOR OUR LIVES ACTION FUND

Internal Revenue Service

Name of the organization

Related Organizations and Unrelated Partnerships

► Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.

► Attach to Form 990.

► Go to <u>www.irs.gov/Form990</u> for instructions and the latest information.

OMB No. 1545-0047

DLN: 93493288005120

Open to Public Inspection

Employer identification number

82-4535615

Part I Identification of Disregarded Entities. Complete if the	organization answe	ered "Yes" on Form	990, Part IV, line	33.				
(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (st or foreign countr	(d) ate Total income y)	(e) End-of-year assets	(f) Direct controlling entity			
(1) SEE PART VII OF SCHEDULE R PO BOX 8929 CORAL SPRINGS, FL 33075	OFFICE SPACE RENTAL	L DE			MARCH FOR OUR LIVES AC	TION FUNE	<u>)</u>	
							_	
							-	
							-	
Part II Identification of Related Tax-Exempt Organizations. Grelated tax-exempt organizations during the tax year.	Complete if the orga	nization answered	"Yes" on Form 990), Part IV, line 34	because it had one or	more		
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	Section (13) co ent	g) 512(b) ntrolled ity?	
						Yes	No	
or Paperwork Reduction Act Notice, see the Instructions for Form 990.		Cat. No. 5013	5Y		Schedule R (Form	990) 20	019	

Part III Identification of Related Organization one or more related organizations treated	ons Taxable as a P ed as a partnership o	artnership. during the ta	Comple x year.	te if the or	ganization	answered "	Yes" on Forr	n 990,	Part I	V, line 34,	becau	se it ha	ad
(a) Name, address, and EIN of related organization		(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	Predomina income(rela unrelated excluded freax unde sections 5:	ated, total incor d, rom er	f Share of end-of-year assets		n) rtionate tions?	(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) Gener mana partn	alor Per ging ow	(k) rcentage ynership
					514)			Yes	No		Yes	No	
Part IV Identification of Related Organization because it had one or more related organizations.	ons Taxable as a C anizations treated as	orporation a corporatio	or Trus n or tru	t. Complet st during t	e if the org he tax year	janization ar 	nswered "Ye	s" on F	orm 9	90, Part IV	, line	34	
(a) Name, address, and EIN of related organization	(b) Primary activity	Le don (state d	c) egal nicile or foreign ntry)	Direc		(e) Type of entity C corp, S corp, or trust)	(f) Share of total income		(g) of end- year assets	of- Percer owne	ntage	Section (13)	(i) on 512(b) controlled ntity?
			,,									Tes	
				-						Calcadada D	/ -	- 000)	

Schedule R (Form 990) 2019				Page 3
Part V Transactions With Related Organizations. Complete if the organization answered	"Yes" on Form 990, Pa	ırt IV, line 34, 35l	o, or 36.	
Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.				Yes No
1 During the tax year, did the organization engage in any of the following transactions with one or more rel	ated organizations listed ir	n Parts II-IV?		
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity				1a
f b Gift, grant, or capital contribution to related organization(s)				1b
${f c}$ Gift, grant, or capital contribution from related organization(s)				1c
f d Loans or loan guarantees to or for related organization(s)				1d
e Loans or loan guarantees by related organization(s)				1e
f Dividends from related organization(s)				1f
g Sale of assets to related organization(s)				1 g
h Purchase of assets from related organization(s)				1h
i Exchange of assets with related organization(s)				1i
j Lease of facilities, equipment, or other assets to related organization(s)				1j
k Lease of facilities, equipment, or other assets from related organization(s)				1k
l Performance of services or membership or fundraising solicitations for related organization(s)				11
m Performance of services or membership or fundraising solicitations by related organization(s)				1m
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)				1n
o Sharing of paid employees with related organization(s)				10
p Reimbursement paid to related organization(s) for expenses				1p
q Reimbursement paid by related organization(s) for expenses				1q
r Other transfer of cash or property to related organization(s)				1r
s Other transfer of cash or property from related organization(s)				1s
2 If the answer to any of the above is "Yes," see the instructions for information on who must complete the	nis line, including covered r	relationships and tra	nsaction thresholds.	
(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining	amount involved
		1	1	

Unrelated Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 37. Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that

was not a related organization. See instructions regarding exc	clusion for certain inv	estment p	artnerships.							•			
(a) Name, address, and EIN of entity	(b) Primary activity	y Legal domicile (state or foreign country)	(related, unrelated.	section 501(c)(3) organizations?		(f) Share of total income	(g) Share of end-of-year assets	(h) Disproprtionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
				Yes	No			Yes	No		Yes	No	
				L						Schedul	e R (Forn	n 99	0) 2019

Schedule R (Form 990) 2019 Page 5 Part VII Supplemental Information Provide additional information for responses to questions on Schedule R. (see instructions). Return Reference Explanation FORM 990, SCHEDULE R, PART I IN 2018, MFOL ACTION FUND FORMED A SINGLE-MEMBER DISREGARDED LLC FOR THE SOLE PURPOSE OF ENTERING INTO A LEASE FOR OFFICE SPACE. UNFORTUNATELY, THIS WAS NECESSARY BECAUSE MFOL STUDENT LEADERS RECEIVED NUMEROUS THREATS TO THEIR SECURITY, ASSESSED AS CREDIBLE BY LAW ENFORCEMENT AND PRIVATE SECURITY CONSULTANTS, INCLUDING AT A PREVIOUS OFFICE LOCATION ONCE THE ADDRESS WAS DISCLOSED. IN ORDER TO PROTECT THEIR SECURITY, AND TO MINIMIZE RISK OF DISRUPTION IN THE OFFICE BUILDING, THE LEASE AND ALL SIGNAGE IS IN THE NAME OF THE LLC. THE ILLC HAS NO REVENUE. EXPENDITURES, OR OTHER ACTIVITY, AND ITS NAME IS BEING PROTECTED TO ENSURE THE SAFETY OF MFOL ACTION FUND'S STUDENT LEADERS, EMPLOYEES, AND VISITORS TO OUR OFFICE.